

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000053429

**Entity Name:** 2 PLUS 2, LLC**Current Principal Place of Business:**7951 SW 6TH STREET SUITE 216  
PLANTATION, FL 33324**Current Mailing Address:**7951 SW 6TH STREET SUITE 216  
PLANTATION, FL 33324 US**FEI Number:** 82-0834717**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SOTO, VERONICA  
151 N NOB HILL ROAD STE 303  
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Authorized Person(s) Detail :**

Title	MGR
Name	LI HOLDING, INC.
Address	7951 SW 6TH STREET SUITE 216
City-State-Zip:	PLANTATION FL 33324

Title	AMBR
Name	JOHNSTON CONSULTING GROUP,LLC
Address	403 MONROE ROAD
City-State-Zip:	CAMERON NC 28326

Title	AMBR
Name	VESS CAPITAL GROUP,INC.
Address	151 N. NOB HILL ROAD SUITE 303
City-State-Zip:	PLANTATION FL 33324

Title	AMBR
Name	L&H INC.
Address	7951 SW 6TH STREET SUITE 216
City-State-Zip:	PLANTATION FL 33324

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KE LI**MANAGER****03/07/2018**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date